



COVID-19 Pandemic – Practice Guidance for Massage Therapists

Version 2 - August 14, 2020
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Summary of updates:

By monitoring provincial guidance and requirements, the College of Massage Therapists of Ontario (CMTO) made the following updates in this version:

- Updates to infection prevention and control (IPAC) requirements ([hand sanitizer alcohol concentration now 70%-90%](#), providing [tissues and lined garbage bins](#) for use by staff and clients)
- [Updates to client screening \(requirement to provide a surgical/procedure mask if screen positive at practice setting\)](#)
- Clarification on client screening (clients must be screened twice – [once before arriving for their appointment](#), and [again upon arrival](#))
- [Clarification on Massage Therapist mask use \(all levels of surgical/procedure masks acceptable, best practice to change after each client but must change when wet, soiled or damaged\)](#)
- [Recommendation for all staff at practice setting to wear surgical/procedure masks when present](#)
- [Tool: Public Health Ontario's Performing a Risk Assessment Related to Routine Practice and Additional Precautions \(for conducting individual risk assessments to determine if additional PPE is warranted\)](#)
- [Recommendation to engage with landlords to ensure cleaning of common spaces](#)
- [Additional information about what needs to be documented in the client health record](#)
- [Information on self-monitoring requirements for RMTs](#)

CMTO has developed the following guidance for Massage Therapists (RMTs) to follow during the COVID-19 pandemic.

Regulated health professionals, including RMTs, are now providing healthcare services that were deferred because of government restrictions during the COVID-19 pandemic. RMTs may only provide healthcare services in accordance with [Ontario Chief Medical Officer of Health's Directive #2](#).



RMTs must follow directions provided by:

- [Ontario's Chief Medical Officer of Health \(CMOH\)](#),
- Ontario Ministry of Health (MOH)'s [guidance for the health sector](#),
- MOH's [COVID-19 Operational Requirements: Health Sector Restart](#), and,
- Public Services Health & Safety Association's [sector-specific workplace safety guidelines](#).

RMTs should not return to practice if they cannot meet the requirements set out in these documents. Even if an RMT is able to meet these requirements, CMTO is not expecting RMTs to return to practice if they do not feel it is appropriate or safe to do so. This information is for RMTs who have assessed the risk associated with COVID-19 and choose to return to practice. CMTO cannot comment on the individual decisions of RMTs, including how they may impact eligibility for the Canada Emergency Response Benefit (CERB) and other government financial benefits.

CMTO's COVID-19 Pandemic – Practice Guidance for Massage Therapists has been prepared based on Ministry of Health and Public Health Ontario information and resources, in collaboration with other healthcare regulators.

CMTO will continue to review guidance and update the Frequently Asked Questions (FAQs) section of the [COVID-19 webpage](#), as we receive questions and as more information becomes available. If you have specific questions after reading this guidance and reviewing the FAQs, please email practicespecialist@cmto.com or call (416) 489-2626/1-800-465-1933 extension 4124.



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Guiding Principles

- RMTs must follow directions provided by:
 - [Ontario’s Chief Medical Officer of Health](#) (CMOH),
 - Ontario Ministry of Health (MOH)’s [guidance for the health sector](#),
 - MOH’s [COVID-19 Operational Requirements: Health Sector Restart](#), and,
 - Public Services Health & Safety Association’s [sector-specific workplace safety guidelines](#).
- RMTs employed by hospitals and long-term care and retirement homes must comply with the directions of their employers and the CMOH.
- The guidance in this document pertains to the delivery of care outside of the settings noted above (e.g., in private practice clinics, home-based practices etc.).
- **In-person Massage therapy treatment should only be provided when the anticipated benefits of treatment outweigh the risks to the client and the RMT.**



CMTO guidance is categorized as follows:

- [Hand Hygiene](#)
- [Cleaning and Disinfecting](#)
- [Preparing Your Practice](#)
- [Booking Appointments](#)
- [The Appointment](#)
- [After the Appointment](#)
- [Personal Protective Equipment \(PPE\)](#)
- [Other Considerations](#)
- [Self-monitoring](#)
- [For Employers](#)

Hand Hygiene

- **RMTs must thoroughly wash their hands (including forearms and elbows) with soap and water between clients.**
- RMTs must encourage frequent and proper hand hygiene for all people present in the practice environment. RMTs should:
 - Set up hand washing and sanitization stations
 - Post signage instructing on proper hand washing techniques
 - **Require everyone, including staff, clients and visitors to wash their hands or sanitize upon arrival**
 - Ensure there are enough supplies within the practice environment for proper hand hygiene, including pump liquid soap in a dispenser, running water, and paper towels.
- Alcohol based [hand sanitizer](#) approved by Health Canada with 70%-90% alcohol may be used by others in the clinic if soap and water are not available to all.
- Gloves are not a substitute for proper hand washing.

Cleaning and Disinfecting

- Cleaning removes visible soiling, while disinfecting uses chemicals to kill germs once a surface is cleaned. A “wipe-twice” method (wipe once to clean, wipe again to disinfect) must be used to both clean and disinfect surfaces.



- Only use [products approved by Health Canada](#) by cross-referencing the Drug Identification Number (DIN) on the product container.
- In addition to [routine practices](#), high-touch surfaces should be cleaned and disinfected at least twice per day, and when visibly soiled. High touch surfaces include: doorknobs, light switches, washrooms including toilet handles, counters, handrails, armrests, and electronics.
- The treatment room and its equipment must be cleaned and disinfected after each use and between clients.
 - All equipment must be in good condition (no tears or rips) to allow for proper cleaning and disinfecting.
 - Pay special attention to the container of topical products (e.g. oil bottle), stool and the massage table.
 - Clean and disinfect the face cradle after each client.
 - Change any face cradle cover after each client.
- Items that are frequently shared, difficult to clean (e.g. upholstered furniture), and/or not necessary to achieving treatment outcomes should be removed. Some examples may include: magazines and other entertainment items; water service, tea service and snacks; product samples or testers; complimentary phone chargers or electronics; and re-usable hand towels.
- Consider altering the space as much as possible to discourage touching shared surfaces.
- Items in the treatment room that cannot be cleaned and disinfected between clients should be removed. Some examples include table warmers/pads and holsters to hold topical products.
- **Linens, blankets and pillows must be changed between clients, and washed and dried in the highest heat possible.** Linens used by clients should be stored in a closed bag or container with a lid until they are washed.
- As RMTs are responsible for additional cleaning and disinfecting between clients, clinics may need to allow more time between clients.
- RMTs must create and maintain records of general infection prevention and control practices they have implemented. These records should reflect the date of and frequency with which the measures were applied. RMTs may choose to retain the infection prevention and control records within their existing equipment record (log), or as a separate record.



Preparing your Practice

- Display clear, visible signage at all entrances and within the practice environment that outline the signs and symptoms of COVID-19, what to do if one is at risk, and how to limit transmission (i.e. hand hygiene, physical distancing and safely covering coughs and sneezes). The Ontario government has provided signage for both [patients/clients](#) and [visitors](#) that can be posted on entrances, and a [poster for within your setting](#). Several [Public Health Units](#) also have similar resources.
- Signage should be posted at the entrance and at reception areas requiring all clients and visitors to wear a mask, perform hand hygiene and then report to reception to identify themselves.
- Redesign physical settings and interactions to minimize contact between individuals where possible (e.g. separate seats in waiting areas by at least two (2) metres to ensure physical distancing of non-household members; consider traffic flow for common spaces; consider installing plexiglass barrier at reception).
- Provide tissues and lined garbage bins for use by staff and patients. No-touch garbage cans (such as garbage cans with a foot pedal) are preferred.
- Develop a process for clients to safely and hygienically provide written consent for treatment of sensitive areas, should the need arise. Plan to disinfect any equipment used during this process (e.g. pens, tablets).
- Document all new procedures, including but not limited to cleaning and disinfecting schedules and responsibilities.

Booking Appointments

- Clients must be screened for risk of COVID-19 before the client comes for their appointment, [following the MOH's COVID-19 Patient Screening Document Guidance](#) and the [COVID-19 Reference Document for Symptoms](#). **If the client does not pass this basic COVID-19 screening, the RMT cannot provide treatment, regardless of the rationale for Massage Therapy treatment.** Advise the client that they should self-isolate and complete the [online self-assessment tool](#) before calling their primary care provider or Telehealth Ontario at 1-866-797-0000. This information should be documented in the client health record and the RMT should not treat the client for at least 14 days, until



the client is asymptomatic, and has been cleared by their primary care provider or Telehealth Ontario of any concern of COVID-19.

- RMTs must use their professional judgement when deciding whether to provide care outside of an environment they can control, such as providing home visits. For information on requirements when entering a client's environment, please review the [MOH's COVID-19 Guidance: Home and Community Care Providers](#).
- Inform clients of any public health measures that have been implemented in advance of the appointment.
- RMTs must instruct the client to come to the appointment wearing a clean disposable or reusable mask that can be worn throughout the treatment. If the client cannot wear a mask (e.g. due to a health condition), RMTs must use their professional judgement to assess the risk of providing or continuing treatment.
- Ask clients to arrive alone (where possible) and as close to their appointment time as possible. If a client is unable to arrive alone, advise the client that the person accompanying them will be screened at arrival to the appointment and will be asked to provide their name and number upon arrival for contact tracing purposes. The person accompanying the client should also be instructed to arrive at the appointment wearing a clean disposable or reusable mask.
- Schedule appointments in a way that allows enough time between clients to implement new cleaning and disinfecting protocol.

The Appointment

- Develop a system to have clients wait outside or in their vehicle if possible. For example, ask the client if they would like to receive a phone call or text message when they can enter the clinic.
- Maintain a roster of all people entering the space (including their name and phone number) to assist with contact tracing if required, ensuring client confidentiality is maintained. In addition to clients, this may include couriers, guardians and support people/workers. Explain to visitors that this information will be used for contact tracing only, should someone who visited the setting later be diagnosed with COVID-19, and that visitors can refuse to provide their name and telephone number.
- Ensure the client washes or sanitizes their hands upon arrival and after treatment.
- RMTs must thoroughly wash their hands (including forearms and elbows) with soap and water before each treatment.



- Immediately prior to treatment, the client must be screened for risk of COVID-19, and the RMT must screen themselves. The RMT is responsible for ensuring the screening is documented in the client’s health record.
 - **If immediately before treatment, the client or RMT does not pass screening, the RMT must not provide treatment.**
- If the RMT encounters a client who has gone through the screening process and enters the setting, yet exhibits signs and symptoms consistent with COVID-19, the RMT must:
 - establish and maintain a safe physical distance of two (2) metres;
 - have the client complete hand hygiene;
 - if the client is not wearing a mask, provide the client with a new surgical/procedure mask;
 - segregate the client from others in the clinic;
 - explain the concern that they are symptomatic, discontinue treatment and reschedule the appointment;
 - advise the client that they should self-isolate and complete the [online self-assessment tool](#) before calling their primary care provider or Telehealth Ontario at 1-866-797-0000;
 - clean and disinfect the practice area and anywhere the client is likely to have touched immediately; and,
 - ensure a record is kept of all close contacts of the symptomatic client and other visitors and staff in the clinic at the time of the visit. This information will be necessary for contact tracing if the client later tests positive symptomatic for COVID-19.

After the Appointment

- RMTs must thoroughly wash their hands (including forearms and elbows) with soap and water after each treatment, and before and after disinfecting.
- Clean and disinfect anything used during the appointment.
- Document all new procedures related to the client in the client health record, including but not limited to screening dates and results, PPE used during treatment and any modifications to treatment.



Personal Protective Equipment (PPE)

- RMTs must obtain appropriate training on safely using and disposing of PPE, related to droplet and contact precautions (including at minimum by completing [the resources offered by Public Health Ontario's "Infection Prevention and Control Fundamentals"](#). If you encounter technical difficulties, please refer to [Public Health Ontario's Online Learning - How Do I Guide](#))
- RMTs must wear a surgical/procedure mask (not cloth) during treatment and whenever within two (2) metres of clients. There are three classifications of surgical/procedure masks under American Society for Testing and Materials (ASTM) International Standards (level 1, 2, and 3). Approved surgical/procedure masks of all levels and number of layers are acceptable for use by RMTs.
- It is best practice for RMTs to change their mask after every client. Masks must be changed whenever wet, damaged or soiled. If an RMT is reusing the same mask between clients, they must ensure the mask is not wet, damaged or soiled. RMTs must wash their hands before and after touching, adjusting, putting on or removing their mask.
- Given community spread of COVID-19 within Ontario and evidence that transmission may occur from those who have few or no symptoms, it is recommended that RMTs and all other staff wear surgical/procedure masks for the full duration of shifts. Some local authorities have mandated the use of masks indoors; RMTs must be aware of and follow local public health or municipal direction.
- The RMT must instruct the client to come to the appointment wearing a clean disposable or reusable mask to be worn throughout the treatment. If a client arrives and is not wearing a mask, the RMT should provide the client with a new surgical/procedure mask to wear for the duration of the appointment. In either case, the RMT should advise the client how to properly put on and take off the mask to limit possible transmission of COVID-19. If the client cannot wear a mask (e.g. due to a health condition), the RMT must use their professional judgement to assess the risk of providing or continuing treatment.
- Ensure clients and visitors do not leave their masks in waiting or common areas.
- Single use gloves may be used but are not required for most treatments. **Gloves do not preclude the need for proper hand hygiene.** If used, gloves must be disposed of and changed between each client. Be aware of potential interaction with gloves and topical



products; if gloves are used, CMTO recommends using nitrile gloves with oil- or water-based products or latex gloves (unless the RMT or client has latex allergy) with water-based products. Vinyl gloves are not recommended as they may not be durable enough for manual work. Monitor glove use with client feedback and consider client preferences.

- To determine if additional PPE is warranted (e.g. face shields, goggles), RMTs should conduct a risk assessment as outlined in [Public Health Ontario's Routine Practices and Additional Precautions in All Health Care Settings](#) (Appendix B) pp. 57-58 and use their professional judgment.
- RMTs may consider taking precautions regarding their own clothing, such as wearing disposable coverings or changing their personal clothing between clients. Clothing should be washed and dried regularly and carefully on as high a heat setting as possible.

Other Considerations

- Though needed for draping, a cloth sheet is likely not sufficiently thick or layered to be an effective transmission barrier for COVID-19.
- Remember that barriers become less effective at preventing transmission when dampened or moistened. Since all fabrics present during treatment (masks, linens, pillows) may become dampened or moistened by the topical product(s) used during treatment, RMTs should be aware of the elevated risk of transmission and take relevant precautions.
- RMTs working in multi-unit buildings (e.g., mixed use offices/medical buildings), should engage with landlords to ensure that the building is following best practices of cleaning in common spaces (e.g. elevators).
- Please note, this guidance details three additional documentation requirements:
 - a general infection prevention and control record/log for the practice,
 - a notation of COVID-19 infection precautions taken for each client in the client health record, including outcome of screening and related decisions; and
 - a roster of all people entering the space for contact tracing purposes.

Documentation should be kept for 10 years.

- If there are any confirmed cases of COVID-19 in a provider, staff, client or visitor of the practice, the RMT should promptly report it to their [local public health unit](#) for advice on their potential exposure and implications for continuation of work.



Self-monitoring

- In addition to self-screening at point of care, RMTs should [continuously monitor themselves for COVID-19 symptoms](#) and not come to work if they:
 - are feeling ill;
 - think they were exposed to COVID-19 (for example, by contact with a person or by travel within Canada); or
 - have returned from travel outside of Canada within the last 14 days.

In these cases, the RMT should complete the [online self-assessment tool](#) and follow the instructions provided.

- If an RMT begins to experience symptoms while at work, the RMT must immediately put on a surgical/procedure mask (if they are not already wearing one), stop providing care, leave work, complete the [online self-assessment tool](#) and follow the instructions provided.

For Employers

Employers have a legal duty under [Ontario's Occupational Health and Safety Act](#) to take every reasonable action to protect the health and safety of workers. This duty is particularly important in the context of COVID-19, where there is a need to protect workers and the public from contracting the virus.

Employers should carefully review the sector specific guidelines listed below and make reasonable efforts to implement the recommended actions. Otherwise, employers could face charges and prosecution under the *Occupational Health and Safety Act*; and employees have the right to refuse work if employers do not take the recommended precautions.

The guidance documents currently available are listed below, by sector or practice setting. The guidance is likely to evolve as the pandemic situation evolves, so it is important to refer to the relevant government and Ministry of Health website for the most up-to-date information.

- MOH's [guidance for the health sector](#)
- MOH's [COVID-19 Operational Requirements: Health Sector Restart](#)
- Public Services Health & Safety Association's [sector-specific workplace safety guidelines](#)